


| | | |
|---|--|---|
| Issue Classification  | Application/Control No. 10537168 | Applicant(s)/Patent Under Reexamination YAMADA ET AL. |
| | Examiner Kriellion A Sanders | Art Unit 1796 |

| ORIGINAL | | | | | | INTERNATIONAL CLASSIFICATION | | | | | | | | | | | | |
|--------------------|-----------------------------------|----------|-----|-----|-----|------------------------------|---|---|---|-----------------|-------------|--|--|--|--|--|--|--|
| CLASS | | SUBCLASS | | | | CLAIMED | | | | | NON-CLAIMED | | | | | | | |
| 524 | | 413 | | | | C | 0 | 8 | K | 3 / 10 (2006.0) | | | | | | | | |
| CROSS REFERENCE(S) | | | | | | C | 0 | 8 | K | 3 / 30 (2006.0) | | | | | | | | |
| | | | | | | C | 0 | 8 | K | 3 / 28 (2006.0) | | | | | | | | |
| CLASS | SUBCLASS (ONE SUBCLASS PER BLOCK) | | | | | | | | | | | | | | | | | |
| 524 | 418 | 425 | 438 | 437 | 449 | | | | | | | | | | | | | |
| 524 | 451 | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |

| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant <input type="checkbox"/> CPA <input type="checkbox"/> T.D. <input type="checkbox"/> R.1.47 | | | | | | | | | | | | | | | |
|---|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|
| Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
| 1 | 1 | | 17 | | | | | | | | | | | | |
| 2 | 2 | | 18 | | | | | | | | | | | | |
| 3 | 3 | | 19 | | | | | | | | | | | | |
| 4 | 4 | | 20 | | | | | | | | | | | | |
| 5 | 5 | | 21 | | | | | | | | | | | | |
| 6 | 6 | 11 | 22 | | | | | | | | | | | | |
| 7 | 7 | | | | | | | | | | | | | | |
| 8 | 8 | | | | | | | | | | | | | | |
| 9 | 9 | | | | | | | | | | | | | | |
| 10 | 10 | | | | | | | | | | | | | | |
| | 11 | | | | | | | | | | | | | | |
| | 12 | | | | | | | | | | | | | | |
| | 13 | | | | | | | | | | | | | | |
| | 14 | | | | | | | | | | | | | | |
| | 15 | | | | | | | | | | | | | | |
| | 16 | | | | | | | | | | | | | | |

| | | | |
|---|--|------------------------------|---------------------|
| NONE | | Total Claims Allowed: | |
| | | 11 | |
| (Assistant Examiner) | | (Date) | |
| /Kriellion A Sanders/ Primary Examiner Art Unit 1796 | | 04/26/2009 | O.G. Print Claim(s) |
| (Primary Examiner) | | (Date) | NONE |
| | | | O.G. Print Figure |
| | | | NONE |